

**REQUEST FOR PERMIT
FOR A PARADE, MEETING, ASSEMBLY OR PROCESSION**

(Please type or print)

NAME OF PERSON REQUESTING PERMIT _____ TELEPHONE NO. _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS: _____

Are you over 18 years of age? _____ Place of Employment _____

ORGANIZATION (if applicable) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

NAME OF ACTIVITY LEADER OR CHAIRMAN _____ TELEPHONE NO. _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Type of Activity (describe in detail; e.g., picketing, public speech, debate, skit, demonstration, etc.)

Description of events planned during the Activity:

Time frame of each Act or Activity desired:

Date (s): _____

Time Activity to Commence: _____ Time Activity to Terminate _____

Exact Location of Act or Activity, including what portion of the streets or sidewalks or other public rights-of-way the Activity will cause to be traversed or used:

Route of Act or Activity: (attach map or diagram or parade route, assembly area, etc.)

Number of Person to Participate (approximately): _____

Number of Minors that may participate (approximately): _____

Age of Minors that may participate: _____

Name (not organization) of persons who will be responsible for such minor(s):

NAME _____ TELEPHONE NO. _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Type of Animals and/or Description of Vehicles (if applicable): _____

Will any costumes, masks, or unusual attire be worn? _____

Will recording equipment, sound amplification equipment, banners, signs, or other attention-getting devices be used in connection with the activity? _____

If so, describe:

Police Protection Services:

Do you anticipate the need for police assistance? _____

If yes, explain what type of police assistance will be needed: _____

How many officers do you feel will be needed to provide adequate protection? _____

The information supplied in this application is complete and true to the best of my knowledge and belief. I understand that any misstatement of material facts will cause the application to be denied.

Date: _____

Signature

Print Name

IMPORTANT

In the event that the temporary closing of public rights-of-way is requested, Section 15.2-2013 of the State Code requires comprehensive liability insurance before allowing such a closing. The standard liability insurance requirement for this type of activity is \$1,000,000.00. If required the Certificate must include "**The City of Lynchburg, its employees and officials are additional insured for the event**" and must be on the face of the Certificate.